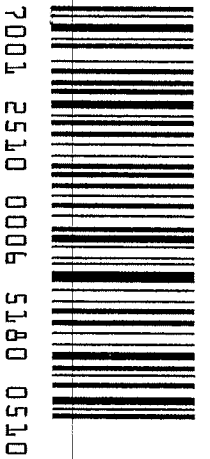


Watson & Norris, PLLC  
1880 Lakeland Drive, Suite G  
Jackson, MS 39216



7001 2510 0006 5180 0510

Carol Stevens  
404 Bellehurst Drive  
Birmingham AL 35215

<b>SENDER: COMPLETE THIS SECTION</b>	
<p>1. Article Addressed to:</p> <p><i>Carol Stevens</i> <i>404 Bellehurst Drive</i> <i>Birmingham, AL</i> <i>35215</i></p>	
<p>2. Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>	
<p>Article Number (Transfer from service label)</p> <p>9590 9402 2077 6132 0445 89</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</p> <p>If YES, enter delivery address below: <input type="checkbox"/> No</p>	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt